GERMANTOWN TORPEDOES

Germantown Outdoor Pool 18905 Kingsview Drive Germantown, MD 20874 240-777-8067

2011 Calendar

Officials Clinic	Tuesday, May 24 at 7:00pm					
(Advanced Referee)	at Olney Swim Center					
Pool Opens	Saturday, May 28					
First Meeting	Tuesday, May 31 at 7pm					
(For All Parents)	at the pool RAIN OR SHINE!!					
Officials Clinic	Wednesday, June 1 at 7:00pm					
(Automation)	at Martin Luther King, Jr. Swim Center					
First Practice	Wednesday, June 1					
Officials Clinic	Sunday, June 5 at 8:00am					
(General Officials)	at Olney Swim Center					
Officials Clinic	Wednesday, June 8 at 7:00-9:00pm					
(Automation)	at Montgomery Aquatic Center					
Officials Clinic	Tuesday, June 7 at 6:00pm					
(General Officials)	at Georgetown Prep.					
Time Trials	Saturday, June 11					
Officials Clinic	Sunday, June 12 at 8:00am					
(General Officials)	at Olney Swim Center					
Officials Clinic	Tuesday, June 21 at 7:00pm					
(Stroke & Turn Only)	at Martin Luther King Swim Center					
Coaches	Tuesday, July 12					
Longcourse Meet	at Rockville Municipal Swim Center					
"A" Divisionals	Saturday, July 23					
"A" Divisionals	(location TBD)					
D.I. All Ci	Saturday, July 30					
Relay All Stars	at Rockville Municipal Swim Center					
T., 322 J., -1 A II C4	Sunday, July 31					
Individual All Stars	at Rockville Municipal Swim Center					

Who's Who

Team Rep Kathy Hogan Rush (301) 540-8343

kathie@rushport.com

MCRD Jeremy Mogus (240) 777-6830

jeremy.mogus@montgomerycountymd.gov

Registration Information

Registration and payment must be completed before attending practices.

Program Fee \$175 per swimmer

Non-County Residents pay an additional \$15 per swimmer.

Germantown Does Not have a Pre-Team

MCRD Outdoor Pools open on May 28th

MCRD Swim Lesson registration begins Monday, June 6, 2011 at 6:30am.

The first swim team meeting will be held at 7:00 pm on Tuesday, May 31, for parents of new and returning swimmers – RAIN OR SHINE! Swimmers may join the team anytime after this date. Registrations must be turned into the MCRD facility. **DO NOT TURN IN YOUR REGISTRATION WITH A COACH OR REP!**

The first practice will be held on Wednesday, June 1 at the designated time. Weekday practices will be Monday through Friday evenings, from June 1 until public schools end. During the summer, practices will be held Monday through Friday in the morning. Evening practices may be scheduled for swimmers who cannot attend in the morning. Practice days and times will be announced at the meeting and will be posted at the pool.

All 6 MCRD pools are members of the Montgomery County Swim League (MCSL). Swim meets for "A" level swimmers are held on Saturday mornings (approximately 8-12:00pm) from June 18 through July 16. "B" level meets are swum on Wednesday evenings (approximately 5-9:30 pm) from mid-June through mid-July. "A" level Divisional Championships will be held Saturday, July 23. Those swimmers who qualify to swim in the All Star Championships compete on Saturday, July 30 and Sunday, July 31.

Online registration begins May 18^{th} . Further information is available on the MCSL website at <u>www.mcsl.org</u> or through your team reps.



Registration Form

Participant or Parent/Guardian Signature _____

Check here if new address/phone/email. Please print. This												
PAYER'S: Las	st Name				First Name			Email				
Add	dress		City					State		Zip		
Home Phone ()					Work Phone ()			Cell Phone ()		
PARTICIPANT'S	S: Address	·				City			State	Z	р	
(if under 18 years)	Mother's Nam	e										
	Home Phone	()	\	Work Ph	one ()	Cell Phone ()			
	Father's Name	e										
			Wo									
Participant's Name (last, first)		Birthdate mm/dd/yy		School Attending	Grade	Activity	Name	Course Number	Location	Start Date	Start Time	Fees*
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												1
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*If you are a no	n-resident, includ	e an additid	onal S	\$15.00 per participa	ınt in the	fee for e	each activity	y.				
☐ Check or Mo	ney Order payabl	e to MCRD), Attr	n: Registrar, 4010 R	andolph	Road, S	ilver Spring	g, MD 20902	2. Total Am	ount Due	: \$	
☐ Master Card	□ Visa	Card No Expira					ration Date					
CARDHOLDER	l:	lame (print) Signa					ature Date_				te	
The participant assume encourages each partic likeness as shown in an Furthermore, the partic	s all risks associated with p ipant to consult his or her y photographs, videotapes ipant consents that such p	participation in the physician concer s, motion picture shotographs, film	e progr ning fiti film, or s, recore	ness to participate in the prog electronic images and any aud	ability for inju ram. The part dio recording	ury or damag ticipant conse us made of the	es arising from pa ents to emergenc e participant's vo	articipation in the participation in the participation in the particle in whatever way	y this form, please call program. Due to the strenuous nat articipant also consents to the Cou y the County desires, including tel r, the parent of guardian approves	ure of some ac unty's use of th evision print a	tivities, the e participar nd Internet	nt's image and websites.

Date_